Foster Family Home - Corrective Action Report

Provider ID:

1-170067

Home Name:

Edna S. Leano, CNA

Review ID:

1-170067-6

91-558 Onelua Street

Reviewer.

Jackie Chamberlain

Ewa Beach

HI

96706

Begin Date:

8/20/2020

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1)

Comply with all applicable requirements in this chapter, and

Comment:

6(d)(1) Home inspection made for a 3 bed CCFFH recertification. Home met all compliance requirements at the time of the home inspection. No corrective action required

Compliance Manager

Primary Care Giver

Date

Date

8/20/2020 17:12 PM